



4-25-05

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PTO/SB/21 (09-04)

TRANSMITTAL FORM

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Total Number of Pages in This Submission

1

Application Number

10/672,819

Filing Date

September 26, 2003

First Named Inventor

Harrison, Charles R.

Art Unit

2643

Examiner Name

Quoc Duc Tran

Attorney Docket Number

20366-092500

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard	
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)			
<input type="checkbox"/> Extension of Time Request			
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<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Document(s)			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53			
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. No fee transmittal is attached as this Amendment is being timely filed with 18 total claims having previously paid for 18 total claims and 4 independent claims having previously paid for 4 independent claims.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

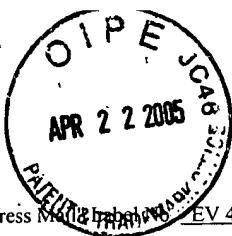
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Steven A. Gahlings		
Date	April 22, 2005	Reg. No.	54,108

CERTIFICATE OF TRANSMISSION/MAILING

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I hereby certify that this correspondence is being deposited with the United States Postal Service with "Express Mail Post Office to Address" service under 37 CFR 1.10 on this date April 22, 2005 and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Sara B. McPeak	Date	April 22, 2005



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PATENT

Attorney Docket No.: 20366-092500

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Alexandria, VA 22313-1450

By: Sara B. McPeak
Sara B. McPeak

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Charles R. Harrison

Application No.: 10/672,819

Filed: September 26, 2003

For: SYSTEMS AND METHODS FOR
DETERMINING THE STATUS OF
TELEPHONE LINES

Customer No.: 20350

Confirmation No. 8932

Examiner: Quoc Duc Tran

Technology Center/Art Unit: 2643

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed January 24, 2005, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.